

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>1/2/00</i>
O.I.P.E. CLASSIFIER			<i>2/17</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

58573
59573

3-1-00
5-17-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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